## COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name;

I believe I am the original, first, and sole inventor (if only one name is listed below), or an original, first, and joint inventor (if plural names are listed below), of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## Primary Lithium Electrochemical Cell

the specification of which

| X | is attached hereto.                           |
|---|---|
|   | was filed on November 19, 2001 as Application |
|   | Serial No. 09/988,298                         |
|   | was filed as PCT International Application    |
|   | Noon  |

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which I know is material to patentability as defined in 37 C.F.R. §1.56.

I hereby appoint the following attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and to file and prosecute national, international, and regional applications which claim priority from this application:

Direct telephone communications to Harold H. Fox at (617) 542-5070.

Direct all correspondence to Robert C. Nabinger at:

## Fish & Richardson P.C. 225 Franklin Street Boston, MA 02110-2804

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further, that these statements were made with knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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|---------------------------------|---|--|
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